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## BIB DATA SHEET

CONFIRMATION NO. 2039

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
08/951,832		604	3761	VAC.312B.US

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 08/517,901 08/22/1995 ABN  
 which is a CIP of 08/293,854 08/22/1994 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## \*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

12/27/1997

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No		TX	11	20	3

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## TITLE

WOUND THERAPY DEVICE AND RELATED METHODS

FILING FEE RECEIVED 1490	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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